

Saint Matthias the Apostle Church Lanham, Maryland 20706

**APPLICATION FOR THE RECEPTION
OF THE SACRAMENT OF CONFIRMATION**

Due December 13, 2012

Candidate's Last Name _____ First Name _____ Middle Name _____ Home Phone Number _____

Parent Email address: _____ cell number _____

Mailing address: _____

Date of Birth: _____ Place of Birth (city, state, country) _____

Mother's Maiden Name _____ First Name _____ Middle Name _____

Father's Last Name: _____ First Name: _____ Middle Name _____

Are you a registered member of Saint Matthias? Yes No Envelope # _____

If you are not registered at Saint Matthias where are you registered?

Parish _____

City _____



RECORD OF BAPTISM

Date of Baptism _____ Name of Church _____

Address of Church (city, state, country) _____

Godfather: _____ Godmother: _____

Note: If Baptism did not take place at St. Matthias, a copy of the Baptismal Certificate must be submitted by December 13, 2012.



RECORD OF HOLY COMMUNION

Date (month, day, year) _____

Parish _____ City _____ State _____



SPONSOR

Sponsor's First, Middle, and Last Name and Address: _____

Name of Sponsor's Parish: _____

City and State of Parish: _____

NOTE: A Sponsor Letter of Good Standing must be obtained by all Sponsors, even if a member of Saint Matthias and turned in by December 13, 2012.